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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Complete if Known							
			Application Number 10/6			0/679,710-Conf. #9983				
FEE TRANSMITTAL			Filing Date October 3, 2		October 3, 200	03				
					Dennis Klinma	an				
For FY 2008			Examiner Name							
Applicant claims small entity status. See 37 CFR 1.27			Art Unit 1648		1648					
TOTAL AMOUNT OF PAYMENT (\$) 1,860.00			0	Attorney Docket No. C1039.7007			JS00			
METHOD OF PAYMENT (check all that apply)										
Check X Credit Card Money Order None Other (please identify):										
Deposit Account Number: 23/2825 Deposit Account Name: Wolf, Greenfield & Sacks, P.C.										
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)										
Charge fee(s) indicated below Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee										
x Charge any additional fee(s) or underpayments of x Credit any overpayments										
fee(s) under 37 CFR 1.16 and 1.17										
1. BASIC FILIN	G, SEARCH, AND E	KAMINATION FEE	S							
	FII	LING FEES	SE.	ARCH FEES		INATION FEES				
Application T	ype Fee (\$	Small Entity Fee (\$)	Fee (\$	Small Entity Fee (\$)	Fee (\$	Small Entity Fee (\$)	Fees	Paid (\$)		
Utility	310	155	510	<u>1 εε (ψ)</u> 255	210	<u>1 σε (ψ)</u> 105	1003	r ala (\$)		
Design	210	105	100	50	130	65	-			
Plant	210	105	310	155	160	80				
Reissue	310	155	510	255	620	310	-			
Provisional	210	105	0	0	0	0	-			
2. EXCESS CLA		103	Ŭ	· ·	Ü	· ·	-	Small Entity		
Fee Description Fee (\$)										
Each claim over 20 (including Reissues)							50	25		
Each independent claim over 3 (including Reissues) 210 10							105			
Multiple dependent claims 370 18							185			
Total Claims	Extra Claims	Fee (\$)	Fee I	Paid (\$) <u>Multiple Deper</u>		Multiple Depende	ent Claims			
- 20 = x = Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20.						<u>\$)</u>				
Indep. Claims	ber of total claims paid for Extra Claims	Fee (\$)	Fee I	Paid (\$)	_					
macp. olamo	-3= 2			- αια (φ)						
HP = highest number of independent claims paid for, if greater than 3.										
3. APPLICATIO		1.100 1 4	c	/ 1 1 1 1 . 1	. 11	C'1 1				
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50										
	action thereof. See 3	()()	` /	` '			_	B : 1 (A)		
Total Sheet				dditional 50 or fra			<u>Fee</u>	<u>Paid (\$)</u>		
100 = /50 = (round up to a whole number) x =										
Non-English Specification. \$130 fee (no small entity discount)										
Other (e.g., late filing surcharge): 1253 Extension for response within third month 1,050.00 1801 Request for continued examination (RCE) (see 37 810.00										
SUBMITTED BY										
Signature Signature	/Patrick R.H. Wal	ler/		Registration No. (Attorney/Agent)	41.418	3 Telephone	617.64	6.8000		
Name (Print/Type)	Patrick R.H. Walle				Date April 29, 2008					
April 29, 2000										

Certificate of Electronic Filing Under 37 CFR 1.8 I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).								
Dated: April 29, 2008	Signature:	/Danielle Calder/	(Danielle Calder)					